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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY CA	SHEETS DRAWING 34	TOTAL CLAIMS 35	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Allowance Examiner's Signature <i>W. H. B.</i> Initials <i>W. H. B.</i>				

ADDRESS
 42304
 CLAIRVOYANTE, INC.
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TITLE
 Display system having improved multiple modes for displaying image data from multiple input source formats

FILING FEE RECEIVED 1428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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